INVENTORSHIP DECLARATION BY JOINT INVENTORS

I HEREBY DECLARE THAT:

П

My residence, post office address, and citizenship are stated next to my name in PART A on hereof.

I believe I am the original, first, and joint inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled

Pseudomonas Treatment Composition and Method

|--|

is attached hereto.

- was filed on 06/11/99 as Application Serial No. 09/329,884 and was amended on _____ (if applicable).
- I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.
- acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal regulations, §1.56.
- hereby claim priority benefits under Title 35, United States Code \$119 of any foreign application(s) for patent or inventor's certificate listed in PART B hereof and have also identified in PART B on hereof any foreign application for patent or inventor's certificate having a filing date before that of the application of which priority is claimed.
- hereby claim the benefit under Title 35, United States Code §119(e) and §120, of any United States application(s) listed in PART C hereof and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations §1.56 which occurred between the filing date of the prior application and any national or PCT international filing date of this application.

I hereby declare that all statements made herein of my knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Please direct all telephone calls to Peter J. Dehlinger at (650) 324-0880. Address all correspondence to:

Dehlinger & Associates P.O. Box 60850 Palo Alto, CA 94306-0850

INVENTORSHIP DECLARATION BY JOINT INVENTORS

PART A: INVENTOR INFORMATION AND SIGNATURE

Full name of FIRST inventor: Randall T. Irvin

Citizenship:Canada Post Office Address: 9 Chelsea Manor, Sherwood

Park, Alberta, Canada T8H 1E2

Residence (if different):

Inventor's Signature: Randall Ima Date: Dec. 15/99

Full name of SECOND inventor: Randy J. Read

Citizenship: Canada Post Office Address: 27 Hinton Avenue, Cambridge,

England CB1 7AR UK

Residence (if different):

Inventor's Signature:

Date: 10 December 1999

Full name of THIRD inventor: Bart Hazes

Citizenship: Dutch Post Office Address: 11117 - 81 Avenue, Edmonton,

Alberta, Canada T6G 0S6

Residence (if different):

Inventor's Signature:

Date: 10 le cember 1999

Full name of FOURTH inventor: Wah Y. Wong

Citizenship: Canada Post Office Address: 17915 - 77 Avenue, Edmonton,

Alberta, Canada T5T 2S1

Residence (if different):

Inventor's Signature:

Date: 6 Jan 2000

| Full name of FIF | TH inventor: Sastry A. | <u>Parimi</u> | |
|---------------------------------|--|---|---------------|
| Citizenship:Cana | | : 2451 - 115 Avenue, Ed erta, Canada T6J 4Z2 | monton, |
| Residence (if di | fferent): | | |
| Inventor's Signa | ture: | Date: | |
| Full name of SIX | TH inventor: Linda M.G. | Glasier | |
| Citizenship:Cana | | : 8408 - 27 Avenue, Edm erta, Canada T6K 3E1 | onton, |
| Residence (if di | | | |
| Inventor's Signa | ture: Hlasier | Date: | 200d <u> </u> |
| PART B: CLAIM TO P | RIORITY OF FOREIGN APPLIC | ATION(S) UNDER 35 U.S.C. § | 119 (a-d) |
| Country | App. No. | Filing Date | |
| | PRIORITY OF U.S. PROVISIO U.S.C. §119(e) AND §120 | NAL AND NONPROVISIONAL AP | PLICATION |
| <u>Serial No.</u> 60/089,155 | Filing Date 06/12/98 | Status Patented Pending Abandoned | |
| | | ☐ Patented☐ Pending☐ Abandoned | |

| Full name of F | IFTH inventor: Sastry | A. Parimi | |
|------------------|---|--|------------------|
| Citizenship:Ca | nada Post Office Add | ress: 2451 - 115 Aven Alberta, Canada T6J | |
| Residence (if | different): | | |
| Inventor's Sig | nature: P. Sushila | a Date: M | arch 14, 2000 |
| | | | |
| Full name of S | IXTH inventor: Linda M | I.G. Glasier | |
| Citizenship:Ca | nada Post Office Add | ress: 8408 - 27 Avenu Alberta, Canada T6K 3 | • |
| Residence (if | different): | | |
| Inventor's Sig | nature: | Date: | |
| PART B: CLAIM TO | PRIORITY OF FOREIGN AP | PLICATION(S) UNDER 35 U | .s.c. §119(a-d) |
| Country | App. No. | Filing Date | |
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| | O PRIORITY OF U.S. PROV 5 U.S.C. §119(e) AND §12 | | ONAL APPLICATION |
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| I hereby certify t hi prespondence is be sufficient postage irs lass Mail in an en Patents, Washington, D.C., 20231, on: | ing deposites he velope addresses to | U.S. Postal Service with Assistant Commissioner for |
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| Date: 4 14 00 | By: bull | Mahoru V |
| Attorney Docket No. 8900-0008.30 | | |
| | \circ | PATENT |
| IN THE UNITED STATES PAT | ENT AND TRADEM | ARK OFFICE |
| IN RE APPLICATION OF: | • | |
| Irvin, et al. | Examiner: | Unknown |
| SERIAL No.: 09/329,884 | ART UNIT: | 1646 |
| Filed: June 11, 1999 | | |
| For: Pseudomonas Treatment Composition | | |
| AND METHOD | | |
| Added Page to Inventor De | claration for | Signing by |
| Administrator(TRIX), Executor(TR | RIX), or Legal | Representative on |
| Behalf of Deceased or incapacit. §1. | | (37 CFR §1.42 and |
| <u>y </u> | 43) | |
| Assistant Commissioner for Patents Washington, D.C. 20231 | | |
| Sir: | | i - I i Transiero de |
| Sir: I, Sushila Parimi, hereby dec | lare that I am | a citizen of |
| Canada, residing at 2451-1 | 15 St Edmonton | AB T6J 4Z2, and |
| that I am executing and signing th attached as | e declaration t | to which this is |
| the administrator(trix) | of | |
| executor(trix) of the la | st will and te | stament of |
| | | |
| | 1. Parimi sp | |
| Inve | S . Parimi 🥕 | |
| Canadian | S . Parimi — | |
| | ntor | |
| Citi | ntor zenship | |
| 2451 - 115 S | zenship Street | |
| 2451 - 115 S Edmonton, AB | zenship Street | |
| 2451 - 115 S Edmonton, AE | zenship Street 3 T6J 4Z2 | |
| 2451 - 115 S Edmonton, AB | zenship Street 3 T6J 4Z2 | |

Respectfully submitted,

Date: March 14, 2000

P.Suslula Sushila Parimi Legal Representative



I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C., 20231, on:

Date: 41(4)00

By: Jeum to Mahonex

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION OF:

Irvin, et al.

SERIAL No.: 09/329,884

FILED: June 11, 1999

FOR: PSEUDOMONAS TREATMENT COMPOSITION

AND METHOD

EXAMINER: Unknown

ART UNIT: 1646

PROOF OF AUTHORITY OF ADMINISTRATOR (TRIX), EXECUTOR (TRIX), OR LEGAL REPRESENTATIVE(S)

Assistant Commissioner for Patents Washington, D.C. 20231

Sir:

The Declaration for the above-identified application was signed on behalf of the deceased inventor $\underline{Sastry\ A.\ Parimi}$ by Sushila Parimi.

Attached is

 □ a Last Will and Testament of Achyutarama Sastry Parimi appointing Sushila Parimi as sole executrix and Trustee of the will and signed by a Notary Public and two witnesses.

In Canada, no Register of Wills exists, and wills need not be decided in a court. Therefore, no certificate is available from a clerk of the court.

Respectfully submitted,

Michael L. Gencarella Registration No. 44,703

Correspondence Address

Customer Number 22918 (650)324-0880

WILL

THIS IS THE LAST WILL AND TESTAMENT of me, ACHYUTARAMA SASTRY PARIMI, of the City of Edmonton, in the Province of Alberta.

- 1. I HEREBY REVOKE all former Wills and testamentary dispositions of every nature or kind whatsoever by me heretofore made.
- I APPOINT my Wife, SUSHILA PARIMI, of the City of Edmonton, in the Province of Alberta, sole Executrix and Trustee of this my Will but if she dies either during my lifetime or after my death but before the trusts hereof shall have terminated, or if she refuses or is unable to act or to continue to act as such Executrix and Trustee, then I APPOINT KRISHNAMURTI VEDAGIRI, of the City of Edmonton, in the Province of Alberta, be the Executor and Trustee hereof and the expression "my Trustees" used throughout includes the Trustee for the time being whether original, substituted or surviving.
- 3. I GIVE, DEVISE AND BEQUEATH all my property of every nature and kind and wheresoever situate, including any property over which I may have a general power of appointment, to my Trustees upon the following trusts namely:
 - (a) To pay my debts, funeral and testamentary expenses;
 - (b) To transfer the residue of my estate to my Wife, SUSHILA PARIMI, of the City of Edmonton, in the Province of Alberta, if she survives me for a period of thirty (30) full days, for her own use absolutely;
 - If my said Wife does not survive me for a period of thirty (30) full days then I direct my Trustees to divide the residue of my estate equally between my children, namely, NITIN PARIMI and SUNIL PARIMI, if they survive me for a period of thirty (30) full days, or to pay or transfer the said residue of my estate to the survivor, if one of my said children does not survive me for a period of thirty (30) full days;
 - (d) If my said children do not survive me for a period of thirty (30) full days then I direct my Trustees to divide the residue of my estate

thereby certify this to be a true copy

the original Ull

which it purports to be a copy.

DATED this 23 wday of 1990

KLD W. KUCKER

TANGIRALA, equally between **AVADHANI** RAMAKRISHNA TANGIRALA, SRIDHARKUMAR PARIMI, SHANKAR RADHAKRISHNA MURTY PARIMI, PARIMI, PRABHAKAR RAO PARIMI, SEETAMAHALAKSHMI JONNAVITTULA, ANNAPURNA PALAPARTI and KOLLI LALITA, or to pay or transfer the said residue to the survivors if one or more of them do not survive me for a period of thirty (30) full days;

PROVIDED HOWEVER that if any of the above beneficiaries do not survive me for a period of thirty (30) full days and any children of such beneficiary of mine are alive at my death, such children shall take in equal shares, the share to which such beneficiary of mine would have been entitled to if alive at my death.

- 4. IF ANY PERSON becomes entitled to a share of my estate before attaining the age of EIGHTEEN (18) years, the share of such person shall be held and kept invested by my Trustees and the income and capital or so much thereof as my trustees in their discretion consider necessary or advisable shall be paid, applied or used for the benefit of such person until he or she attains the age of EIGHTEEN (18) years.
- 5. IN ADDITION TO all powers vested in executors or trustees by law or statute I give my Trustees the following powers to carry out the terms of my Will:
- To sell, call in and convert into money any part or parts (a) of my estate not consisting of money or negotiable securities in such manner and upon such terms and either for cash or credit or for part cash and part credit as my Trustees in their uncontrolled discretion may decide upon with power and discretion to postpone any such conversion of my estate or any part or parts thereof for such length of time as they may think best, and I hereby declare that my Trustees may retain any portion of my estate (notwithstanding that it may not be in the form of an investment in which trustees are authorized to invest trust funds and whether or not there is a liability. attached to any such portion of my estate) for such length of time as my Trustees may in their discretion deem advisable.
- (b) To make any division of my estate or set aside or pay any share or interest in it, either wholly or in part, and my Trustees may determine the value of my estate or any part

of it for the purpose of making such division, setting aside or payment and such determination shall be binding upon all persons concerned, notwithstanding that any of my Trustees may be personally interested in such division.

- To make payments for any person under the age of (c) EIGHTEEN (18) years to a parent or guardian of such person for the maintenance, education or advancement on behalf of that person. The receipt of such parent and guardian shall be a sufficient discharge to my Trustees.
- To borrow money in such amounts, at such times and such (d) rates of interest and on such conditions and to grant such security upon the assets of my estate as my Trustees may think proper and in the interest of my estate.
 - To sell, mortgage, exchange, lease, grant options or otherwise dispose of or deal with any real estate held by my Trustees and to repair, alter, improve, add to or remove any buildings thereon and generally to manage such real estate.

To invest, and from time to time reinvest, assets of my estate in securities and investments inside and outside of Canada which in their uncontrolled discretion they consider advisable and without being limited to those investments to which executors and trustees are otherwise restricted by law.

To continue and renew any bills, notes, guarantees or other securities or contracts relating to them, but only for the purpose of facilitating an orderly liquidation of those obligations.

To treat and apply from the date of my death all income from my estate as income of the residue of my estate from whatever source or class of investment or property the same shall arise and no property not producing income shall be treated as producing income.

To make or not make any election, determination, designation, or allocation under The Income Tax Act that they consider to be in the best interests of my estate The exercise by my and the beneficiaries thereunder. Trustees of their discretion shall be binding upon all beneficiaries of my estate even though an advantage may be conferred upon any beneficiary at the expense of any other beneficiary and even though an even hand is not maintained among the beneficiaries.

(e)

SC. CSELFI

(h)

(g)

(i)

- To pay any income taxes payable by my estate in instalments as permitted by The Income Tax Act if they (j) consider such deferment to be in the best interests of my estate and its beneficiaries and to give security from my estate for such instalment payments.
- To employ and pay any other person or persons, including a body corporate, to transact any business or to do any (k) act of any nature in relation to my Will and trusts including the receipt and payment of money, without being And I authorize my liable for any loss incurred. Trustees to appoint from time to time upon such terms as they may think fit any person or persons, including a body corporate, for the purpose of exercising any of the trusts or powers herein expressly or impliedly given to my Trustees with respect to any property belonging to me.
- MY TRUSTEES shall not be liable for any loss to my estate or to any beneficiary resulting from the exercise by them in good faith of any discretion given to them in this my Will.

I, ACHYUTARAMA SASTRY PARIMI, have subscribed my name to this Will on the 20th day of March, 1992, at the City of Edmonton, in the Province of Alberta.

SIGNED BY ACHYUTARAMA SASTRY PARIMI as his Will, in our presence and attested by us in his presence and in the presence of each other.

Occupatión

Witness

Address

Occupation

Attorney Docket No.: 8900-0008.30

Applicant:

Irvin and Hodges

Serial No.:

09/329,884

Filing Date

June 10, 1999

For:

Vaccine for Pseudomonas aeruginosa

Small Entity Statement Under 37 CFR §1.9(f) and §1.27(c) - Nonprofit Organization

I hereby declare that I am an official empowered to act on behalf of the nonprofit organization identified below:

Name of Organization: The Governors of the University of Alberta

Address of Organization: 222 Campus Towers, 8625-112 Street, Edmonton, Alberta, T6G 2E1, Canada

| ⊠ | University or other institution of higher education. |
|--------|--|
| | Tax exempt under Internal Revenue Service Code (26 USC $\$501(a)$ and $\$501(c)(3)$). |
| | Nonprofit scientific or educational under statute of state of the United States of America. |
| | ☐ Name of State: ☐ Citation of Statute: |
| | Would qualify as tax-exempt under Internal Revenue Service Code (26 USC $\$501(a)$ and $\$501(c)(3)$) if located in The United States of America. |
| 0 | Would qualify as nonprofit scientific or educational non-profit under statute of state of The United States of America if located in The United States of America. |
| | □ Name of State: □ Citation of Statute: |
| a nong | eby declare that the nonprofit organization identified above qualifies as profit organization as defined in 37 CFR 1.9 (e), for purposes of paying ed fees under 35 U.S.C. §41 to the U.S. Patent and Trademark Office in etion with the invention described in: |
| • | Application Serial No. 09/329,884, filed June 10, 1999 |
| | U.S. Patent No issued |
| | the state of the s |

If the rights held by the above identified small business concern are not exclusive, each individual, concern or organization having rights to the invention is listed below and no rights to the invention are held by any person, other than the inventor, who could not qualify as a small business concern under 37 CFR \$1.9 (d) or by any concern which would not qualify as an independent inventor under 37 CFR \$1.9 (c) if that person made the invention, or by any concern which would not qualify as a small business concern under 37 CFR \$1.9 (d) or a nonprofit organization under 37 CFR \$1.9 (e).

NOTE: Separate Verified Statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR \$1.27).

| Name: Cyt | covax Bio | technologi | es Inc. | | | | |
|-----------|-----------|-------------|----------|----------------|----------|--------------|----------|
| Address: | Suite 10 | 00, 8905-51 | Avenue | Edmonton, | Alberta, | T6G 2E1, | Canada |
| | | individual | [A email | husiness conce | rn 🗆 non | profit organ | nization |

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate $(37\ CFR\ \$1.28(b))$.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. \$1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this statement is directed.

| Name of person signing: | LAINE WOOLLARD, B.Sc. (PHARM), LL.B. BARRISTER AND SOLICITOR, NOTARY PUBLIC |
|---------------------------|--|
| Title of person signing: | INTELLECTUAL PROPERTY AND LEGAL MANAGER INDUSTRY LIAISON OFFICE, U OF A |
| Address of person signing | j: |
| Signature: | uie cesollarel |
| Date: August | 27,1999 |
| | |

Attorney Docket No.: 8900-0008.30

Applicant:

Irvin and Hodges

Serial No.:

09/329,884

Filing Date:

June 10, 1999

For:

Vaccine for Pseudomonas aeruginosa

Small Entity Statement Under 37 CFR §1.9(f) and §1.27(c) Small Business Concern

I hereby declare that I am:

☐ The owner of the small business concern identified below:

An official of the small business concern empowered to act on behalf of the concern identified below:

Name of Concern:

Cytovax Biotechnologies Inc.

Address of Concern:

Suite 100, 8905-51 Ave., Edmonton,

Alberta, T6G 2E1, Canada

hereby declare that the above-identified small business concern qualifies as a small business concern as defined in 13 CFR \$121.12, and reproduced in 37 CFR \$1.9(d), for purposes of paying reduced fees under 35 U.S.C. \$41 in that the number of employees, including those of its affiliates, does not exceed 500 persons and the concern has not assigned, granted, conveyed, or licensed, and is under no obligation under contract or law to assign, grant, convey, or licenses, any rights in the invention to any person who could not be classified as an independent inventor if that person had made the invention, or to any concern which would not qualify as a small business concern or a nonprofit organization under this section. For this section, concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third party or parties controls or has the power to control both. The number of employees of the business concern is the average over the fiscal year of the persons employed during each of the pay periods of the fiscal year. Employees are those persons employed on a full-time, part-time or temporary basis during the previous fiscal year of the concern.

Linereby declare that rights under contract or law in the above-identified application have been conveyed to and remain with the small business concern identified above.

If the rights held by the above-identified small business concern are not exclusive, each individual, concern or organization having rights to the invention is listed below* and no rights to the invention are held by any person, other than the inventor, who could not qualify as a small business concern under 37 CFR \$1.9(d) or by any concern which would not qualify as an independent inventor under 37 CFR \$1.9(c) if that person made the invention, or by any concern which would not qualify as a small business concern under 37 CFR \$1.9(d) or a nonprofit organization under 37 CFR \$1.9(e).

NOTE: Separate statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR \$1.27).

Name: The Governors of the University of Alberta

Address: 222 Campus Towers, 8625-112 St., Edmonton, AB, T6g 2E1, Canada

☐ individual ☐ small business concern ☐ nonprofit organization

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate (37 CFR §1.28(b)).

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. §1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this statement is directed.

| Name of person signing: James Chivers- Wilson | |
|---|----|
| Title of person signing: Chief Operating Officer | |
| Address of person signing: 30% 8925-51 Ave. Edmonton Alberta Top Signature: Signature: S | 5J |
| Signature: James H. Sawers-William | |
| Date: September 1, 1999 | |